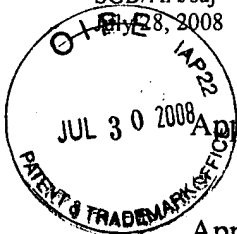


IFW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Applicants: Oemer Uensal, Joachim Kiefer, Gordon Calundann, Michael Sansone,
Brian Benicewicz, Eui Won Choe

Application No.: 10/529,993 Group: 1795

371(c) Filing Date: April 12, 2005 Examiner: Eugenia Wang

Confirmation No.: 5423

For: Proton-Conducting Polymer Membrane Comprising Sulfonic Acid-
Containing Polyazoles, and Use Thereof in Fuel Cells

CERTIFICATE OF MAILING OR TRANSMISSION	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:	
<u>7-28-08</u>	<u>Sandra J. [Signature]</u>
Date	Signature
<u>Sandra</u>	<u>[Signature]</u>
Typed or printed name of person signing certificate	

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for filing in the above-identified application.

- ☐ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.
- ☐ A Small Entity Statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

The claims fee has been calculated as shown below:

					SMALL ENTITY		OTHER THAN SMALL ENTITY		
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	OR	RATE	ADDIT. FEE
TOTAL	27	MINUS	* 27	0	X \$ 25	\$		X 50	\$ 0
INDEP	3	MINUS	** 3	0	X \$105	\$		X \$210	\$ 0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+	\$185	\$	+	\$370
					TOTAL = \$ 0			TOTAL = \$ 0	

* not fewer than 20
** not fewer than 3

The Application Size Fee has been calculated as shown below:

(Effective for cases filed on or after December 8, 2004)

Actual Sheets (Including current amendment)	Highest No. of Sheets Paid For (At least 100)	No. of Additional Units Required (Increments of 50 sheets)	SMALL ENTITY		OTHER THAN SMALL ENTITY		Payment Sufficient for up to
			Rate	Total Amount Owed	Rate	Total Amount Owed	
58	100	0	X \$130	\$[]	X \$260	\$[]	100 Sheets

Petition for Extension of Time

- ☒ Applicant hereby petitions to extend the time to respond to the Office Action dated February 28, 2008 for two month(s) from May 28, 2008 to July 28, 2008. The appropriate fee is set forth below.
- ☐ [For action-specific language in an extension of time, select the appropriate option from the Firm Templates]

Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time,	\$	_____
<input type="checkbox"/>	Claims Fee	\$	_____
<input type="checkbox"/>	Application Size Fee	\$	_____
<input type="checkbox"/>	Other Fees:	\$	_____
		\$	_____
		\$	_____
TOTAL:		\$	_____

A check is enclosed in payment of the following fees:

<input checked="" type="checkbox"/>	Petition for two month Extension of Time	\$	460
<input type="checkbox"/>	Claims Fee	\$	_____
<input type="checkbox"/>	Application Size Fee	\$	_____
<input type="checkbox"/>	Other Fees:	\$	_____
		\$	_____
		\$	_____
TOTAL:		\$	460

- ☒ Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380. If this submission is in paper form, a copy of this letter is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By Alexander Akhiezer
Alexander Akhiezer
Registration No.: 54,617
Telephone (978) 341-0036
Facsimile (978) 341-0136

Concord, Massachusetts 01742-9133

Dated: 7/28/08



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Oemer Uensal, Joachim Kiefer, Gordon Calundann, Michael Sansone,
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Date 7-28-08	Signature Sandra J. Jomal
Typed or printed name of person signing certificate Sandra J. Jomal	

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Commissioner for Patents
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<input type="checkbox"/>	Other Fees:	\$	_____
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		\$	_____
TOTAL:		\$	_____

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<input type="checkbox"/>	Application Size Fee	\$	_____
<input type="checkbox"/>	Other Fees:	\$	_____
		\$	_____
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